PTO/SB/22 (06-04)

Approved for use through 07/31/2006. OMB 0651-0031
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Application Number O O O O O O O O O	PETITION	FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)		
For EXTENDED SCREW FOR SPINAL STABLIZATION Art Unit 373 Examiner Relp DAVIDO. Art Unit 373 Examiner Relp DAVIDO. This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee	Application	Number 10/082 332	Ellad END DE 2007		
Art Unit 373 Examiner Re IP DAUDD. This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee		10/003,33	1 5-16		
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One month (37 CFR 1.17(a)(1)) \$110 \$555 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	This is a recapplication.	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified			
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One month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Section Secti	_	<u>Fee</u>	•		
Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) \$1480 \$740 \$52.6 Five months (37 CFR 1.17(a)(5)) \$2010 \$1005 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director has already been authorized to charge swhich may be required, or credit any overpayment, to Deposit Account Number	×	One month (37 CFR 1.17(a)(1)) \$110			
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Five months (37 CFR 1.17(a)(5)) \$2010 \$1005 CM OCCOUNTER ROTO Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number			\$475		
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Registration number if acting under 37 CFR 1.34 ROBERT A DIXON Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
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Signature ROBERT A. DIXON Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		P Dn	8/25/04		
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		Signature	Date		
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	VOTE: Signature signature is requ	s of all the inventors or assignees of record of the entire interest or their representatives. see below.	ative(s) are required. Submit multiple forms if more than one		
	Total	of forms are submitted.			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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PETITION OF TIME UNDER 37 CFR	2 1.136(a) Docket Number (Optional)		
Application Number /0/083, 332	Filed FEB, 25 2002		
FOR EXTEND SEREN FOR SPI	NAC STABLIZATION		
Art Unit 3731	Examiner RETP, DAVID O.		
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, E	ee Small Entity Fee		
One month (37 CFR 1.17(a)(1)) \$1	10 \$55 A \$ <u>55</u>		
Two months (37 CFR 1.17(a)(2)) \$42	20 \$210		
Three months (37 CFR 1.17(a)(3)) \$99	50 \$47ECHI		
Four months (37 CFR 1.17(a)(4)) \$14	80 \$740 NOLOGY \$ 2007		
Five months (37 CFR 1.17(a)(5)) \$20	10 \$1005		
Three months (37 CFR 1.17(a)(3)) \$950 \$478C/HO/OCY \$2004 Four months (37 CFR 1.17(a)(4)) \$1480 \$740 \$740 \$2004 Five months (37 CFR 1.17(a)(5)) \$2010 \$1005 Applicant claims small entity status. See 37 CFR 1.27.			
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I am the applicant/inventor.			
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attorney or agent of record. Registration Number			
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 Daylor Hannan Signature B-2/-04 Date			
DONALD JHACK Typed or printed name	MAN 614-451-725/ Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
Total of forms are submitt	ed.		

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